# House File 333 - Introduced

HOUSE FILE 333

BY STECKMAN, ANDERSON,
McCONKEY, SUNDE, WINCKLER,
EHLERT, B. MEYER, DONAHUE,
WESSEL-KROESCHELL,
ABDUL-SAMAD, HUNTER,
BROWN-POWERS, and KONFRST

# A BILL FOR

- 1 An Act relating to health care coverage benefits for the
- 2 diagnosis and treatment of infertility, and for fertility
- 3 preservation services, and including applicability
- 4 provisions.
- 5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

#### H.F. 333

- 1 Section 1. NEW SECTION. 514C.36 Infertility.
- As used in this section, unless the context otherwise
- 3 requires:
- 4 a. "Cost-sharing" means any coverage limit, copayment,
- 5 coinsurance, deductible, or other out-of-pocket expense
- 6 obligation imposed on a covered person by a policy, contract,
- 7 or plan providing for third-party payment or prepayment of
- 8 health or medical expenses.
- 9 b. "Covered person" means a policyholder, subscriber, or
- 10 other person participating in a policy, contract, or plan that
- 11 provides for third-party payment or prepayment of health or
- 12 medical expenses.
- 13 c. "Diagnosis and treatment for infertility" means health
- 14 care services or prescription drugs recommended by an
- 15 individual's health care professional and that are consistent
- 16 with the established medical practices or published guidelines
- 17 of the American college of obstetricians and gynecologists,
- 18 or of the American society for reproductive medicine, for the
- 19 diagnosis and treatment of infertility.
- 20 d. "Fertility preservation services" means health
- 21 care services recommended by an individual's health care
- 22 professional and that are consistent with the established
- 23 medical practices or published guidelines of the American
- 24 society for reproductive medicine, or of the American society
- 25 of clinical oncology, for the treatment of an individual who
- 26 has a medical condition or is expected to undergo medication
- 27 therapy, surgery, radiation, chemotherapy, or other medical
- 28 treatment that creates a risk of impairment of the individual's
- 29 fertility.
- 30 e. "Health care professional" means the same as defined in
- 31 section 514J.102.
- 32 f. "Health care services" means services for the diagnosis,
- 33 prevention, treatment, cure, or relief of a health condition,
- 34 illness, injury, or disease.
- 35 g. "Infertility" means a health condition, illness, injury,

- 1 or disease characterized by any of the following:
- 2 (1) The failure to establish a pregnancy or to carry a
- 3 pregnancy to live birth after regular, unprotected sexual
- 4 intercourse.
- 5 (2) The inability of an individual to reproduce without
- 6 medical intervention either as a single individual or with a
- 7 partner.
- 8 (3) A health care professional's diagnosis based on an
- 9 individual's sex, age, medical history, sexual history, or
- 10 reproductive history; or a physical examination or diagnostic
- 11 testing.
- 12 2. Notwithstanding the uniformity of treatment requirements
- 13 of section 514C.6, a policy, contract, or plan providing for
- 14 third-party payment or prepayment of health or medical expenses
- 15 shall provide coverage for the diagnosis and treatment of
- 16 infertility, and for fertility preservation services.
- 3. Coverage shall not be subject to cost-sharing,
- 18 waiting periods, or exclusions that are different than the
- 19 cost-sharing, waiting periods, or exclusions that a policy,
- 20 contract, or plan imposes for other health or medical expenses
- 21 covered under the policy, contract, or plan.
- 22 4. a. This section shall apply to the following classes of
- 23 third-party payment provider contracts, policies, or plans:
- 24 (1) Individual or group accident and sickness insurance
- 25 providing coverage on an expense-incurred basis.
- 26 (2) An individual or group hospital or medical service
- 27 contract issued pursuant to chapter 509, 514, or 514A.
- 28 (3) An individual or group health maintenance organization
- 29 contract regulated under chapter 514B.
- 30 (4) A plan established for public employees pursuant to
- 31 chapter 509A.
- 32 (5) The medical assistance program established pursuant
- 33 to chapter 249A, including a managed care organization acting
- 34 pursuant to a contract with the department of human services to
- 35 provide coverage to medical assistance program members.

## H.F. 333

- 1 b. This section shall not apply to accident-only, specified
- 2 disease, short-term hospital or medical, hospital confinement
- 3 indemnity, credit, dental, vision, Medicare supplement,
- 4 long-term care, basic hospital and medical-surgical expense
- 5 coverage as defined by the commissioner of insurance,
- 6 disability income insurance coverage, coverage issued as a
- 7 supplement to liability insurance, workers' compensation or
- 8 similar insurance, or automobile medical payment insurance.
- 9 5. The commissioner of insurance shall adopt rules pursuant
- 10 to chapter 17A to administer this section.
- 11 Sec. 2. APPLICABILITY. This Act applies to third-party
- 12 payment provider contracts, policies, or plans delivered,
- 13 issued for delivery, continued, or renewed in this state on or
- 14 after January 1, 2022.
- 15 EXPLANATION
- 16 The inclusion of this explanation does not constitute agreement with
- 17 the explanation's substance by the members of the general assembly.
- 18 This bill relates to health care coverage benefits for the
- 19 diagnosis and treatment of infertility, and for fertility
- 20 preservation services.
- 21 The bill defines "infertility" as a health condition,
- 22 illness, injury, or disease characterized by the failure to
- 23 establish a pregnancy or to carry a pregnancy to live birth
- 24 after regular, unprotected sexual intercourse; or the inability
- 25 of an individual to reproduce without medical intervention
- 26 either as a single individual or with a partner; or a health
- 27 care professional's diagnosis based on a covered person's sex,
- 28 age, medical history, sexual history, or reproductive history;
- 29 or a physical examination or diagnostic testing.
- 30 The bill defines "diagnosis and treatment for infertility"
- 31 as health care services or prescription drugs recommended by an
- 32 individual's health care professional and that are consistent
- 33 with the established medical practices or published guidelines
- 34 of the American college of obstetricians and gynecologists,
- 35 or of the American society for reproductive medicine, for

## H.F. 333

- 1 the diagnosis and treatment of infertility. "Health care
- 2 professional" is defined in the bill.
- 3 "Fertility preservation services" is defined in the bill
- 4 as health care services recommended by a individual's health
- 5 care professional and that are consistent with the established
- 6 medical practices or published guidelines of the American
- 7 society for reproductive medicine, or of the American society
- 8 of clinical oncology, for the treatment of an individual who
- 9 has a medical condition or is expected to undergo medication
- 10 therapy, surgery, radiation, chemotherapy, or other medical
- ll treatment that creates a risk of impairment of the individual's
- 12 fertility.
- 13 The bill requires a health carrier that offers individual,
- 14 group, or small group contracts, policies, or plans in this
- 15 state that provide for third-party payment or prepayment
- 16 of health or medical expenses to provide coverage for the
- 17 diagnosis and treatment of infertility, and for fertility
- 18 preservation services. The coverage cannot be subject to
- 19 cost-sharing, waiting periods, or exclusions that are different
- 20 than the cost-sharing, waiting periods, or exclusions that the
- 21 policy, contract, or plan imposes for other covered health or
- 22 medical expenses.
- 23 The bill applies to the third-party payment providers
- 24 enumerated in the bill. The bill specifies the types of
- 25 specialized health-related insurance which are not subject to
- 26 the coverage requirements of the bill.
- 27 The commissioner of insurance must adopt rules to administer
- 28 the requirements of the bill.
- 29 The bill applies to third-party payment provider contracts,
- 30 policies, or plans delivered, issued for delivery, continued,
- 31 or renewed in this state on or after January 1, 2022.